



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
250 Washington Street, Boston, MA 02108-4619

MITT ROMNEY
GOVERNOR

KERRY HEALEY
LIEUTENANT GOVERNOR

TIMOTHY R. MURPHY
SECRETARY

PAUL J. COTE, JR.
COMMISSIONER

TO: Massachusetts Local Boards of Health

FROM: Jeff Timperi, Behavioral Health and Special Populations Liaison
Massachusetts Department of Public Health, Center for Emergency Preparedness

RE: State Disaster Behavioral Health Services

DATE: April 5, 2006

I Introduction

The intent of this memorandum is to: 1) provide a brief overview of the larger disaster behavioral health services that have been developed via a collaboration between the Massachusetts Department of Public Health's Center for Emergency Preparedness (MDPH-CEP), MDPH's Bureau of Substance Abuse Services (MDPH-BSAS), and the Massachusetts Department of Mental Health (MDMH); and 2) describe how these services can be accessed by local boards of health (or other agencies/organizations).

Please note that a statewide disaster behavioral health plan is currently being developed by MDPH and MDMH, which will expand on the initiatives and protocols below.

a) Massachusetts Department of Public Health, Center for Emergency Preparedness

In 2004, the Massachusetts Department of Public Health (MDPH), through its Center for Emergency Preparedness (CEP), partnered with the Massachusetts Department of Mental Health (MDMH) and MDPH's Bureau of Substance Abuse Services (BSAS) to provide a comprehensive disaster behavioral health response plan for the Commonwealth of Massachusetts. This was done in order to meet U.S. Health Resources and Services Administration National Bioterrorism Hospital Preparedness Program cooperative agreement critical benchmark 2-8.

MDPH-CEP recognized that MDMH, as the Commonwealth's mental health authority, would be a necessary and valuable partner. MDMH has centralized oversight over a large system of mental health programs and services in Massachusetts and is a longstanding member of the Massachusetts Emergency Management Team. In addition, MDMH is a support agency to MDPH under Massachusetts Emergency Support Function 8 (Health and Medical) and is the entity that administers FEMA crisis counseling grants when a presidential declaration of emergency occurs. Furthermore, MDMH, in cooperation with MDPH-BSAS, chairs the state's Disaster Behavioral Health Services Committee and has participated in disaster preparedness and response activities for over ten years.

The Behavioral Health and Special Populations Liaison for MDPH-CEP is Mr. Jeff Timperi. Jeff can be reached at 617.624.5275, or via e-mail at Jeffrey.Timperi@state.ma.us.

b) Massachusetts Department of Public Health, Bureau of Substance Abuse Services

MDPH's Bureau of Substance Abuse Services (BSAS) is the single state authority in charge of funding, licensing, and overseeing substance abuse prevention and treatment services across the Commonwealth. BSAS does not provide these services to the community directly – rather, BSAS contracts with providers for these services. The role of BSAS in the event of an emergency is twofold: 1) meeting the substance abuse service needs of the community, and 2) coordinating substance abuse services as part of the state behavioral health disaster response.

During a disaster, BSAS will support and oversee its providers in order to ensure the continuation of substance abuse services delivery. To prepare for disasters, MDPH has conducted all-hazards and continuity of operations training for programs.

BSAS Regional Managers are the point-persons who oversee the everyday work of the providers. A contact list for these individuals is included as an attachment to this document (see Department of Public Health – Bureau of Substance Abuse Services Emergency Contact List). During a disaster, they would work with the BSAS All-Hazards Coordinator to connect with MDPH-CEP and MDMH to coordinate any necessary substance abuse services.

The All-Hazards Coordinator for MDPH-BSAS is Mr. Rodrigo Monterrey. Rodrigo can be reached at 617.624.5147, or via e-mail at Rodrigo.Monterrey@state.ma.us.

c) Massachusetts Department of Mental Health

MDMH has one Emergency Management Director, one Emergency Management Coordinator, and six Area Emergency Management Coordinators (each is assigned to one of the six MDMH areas). Each MDMH Area Emergency Management Coordinator has an assigned backup coordinator. A contact list for these individuals is included as an attachment to this document (see Department of Mental Health – Emergency Management Phone Numbers).

For information on the MDMH areas, please visit:

<http://www.mass.gov/portal/site/massgovportal/menuitem.6b3609bb385731c14db4a11030468a0c/?pageID=eohhs2subtopic&L=5&L0=Home&L1=Government&L2=Departments+and+Division&L3=Department+of+Mental+Health&L4=DMH+Offices&sid=Eeohhs2>

The Emergency Management Director for MDMH is Ms. Ashley Pearson. Ashley can be reached at 617.626.8145, or via e-mail at Ashley.Pearson@state.ma.us.

II State Disaster Behavioral Health Services

During a statewide disaster, MDPH and MDMH would coordinate disaster behavioral health services at the State Emergency Operations Center (SEOC). If the SEOC is not activated (local emergency), MDPH-BSAS and MDMH can still provide the services below as well as long-term behavioral health recovery services.

a. Behavioral Health Disaster Responders ('crisis counselors')

b. MassSupport

a. Behavioral Health Disaster Responders

Behavioral Health Disaster Responders (or 'crisis counselors') are trained volunteers who can provide a short-term intervention with individuals experiencing psychological distress due to a disaster. MDPH and MDMH, with the assistance of Boston Medical Center's Center for Multicultural Health, revised the existing course and trainings have been conducted throughout the Commonwealth. More information on upcoming training courses can be found here: <http://www.cmmh-cmtp.org/services-bhdrtp-trainingdates.php>. Training dates will also be posted on the Local Public Health Training Institute's website: <http://www.masslocalinstitute.org/>

The overall purpose of this training course is to increase the amount of volunteer Behavioral Health Disaster Responders in Massachusetts. Currently, there are 956 individuals who have taken this course and registered with MDMH to be a volunteer Behavioral Health Disaster Responder.

b. MassSupport

MassSupport was designed to help individuals deal with concerns resulting from disasters and crises at the national, state, or local level.

MassSupport offers aid in three distinct ways: (1) a website <http://www.mass.gov/samh/>; (2) a toll-free 24/7 helpline number - 866.237.8274; and (3) print materials that can be downloaded or requested.

The website has links to state and federal government agencies and includes material on *Common Reactions to a Disaster* and *Coping With a Disaster*. In addition, individuals may access a database that contains resources and contact information for various government agencies, relief organizations, inter-faith groups, and behavioral health providers.

The toll-free 24/7 helpline, which has interpreter and TTY services available, will connect callers to staff who can provide information on relief and behavioral health services. In the event of a large-scale disaster, the helpline can be enhanced by having trained behavioral health disaster responders available to answer telephone calls.

The available print materials include a Family Disaster Plan and Family Emergency Card that can be downloaded or mailed to individuals at no cost. These materials are available in English, Chinese, French, Haitian-Creole, Italian, Russian, Portuguese, Spanish, Greek, Khmer, and Vietnamese.

III How to access state Behavioral Health Disaster Responders

Behavioral Health Disaster Responders can be used in two types of situations which are detailed below:

Situation A: Local emergencies, such as: fire, community vaccination clinics, suicide, violent act/death

Situation B: National/State-declared disaster, such as: large-scale natural disaster, terrorist attack, airline crash

For events corresponding with ‘Situation A’, the local board of health (or other agency/organization) should contact their respective MDMH Area Emergency Management Coordinator (AEMC) if disaster behavioral health services are needed.

The MDMH AEMC would work with their respective MDMH Area Director and the MDMH Emergency Management Director to determine the capacity for assistance that could be provided. The MDMH Emergency Management Director will contact the MDPH-CEP Behavioral Health and Special Populations Liaison of any disaster behavioral health service requests from local boards of health.

In events corresponding with Situation B, the State Emergency Operations Center would be activated and MDPH, through its ESF8 responsibilities, would activate MDMH to deploy behavioral health disaster responders if needed. MDPH-CEP would also work with MDPH-BSAS and MDMH to coordinate other disaster behavioral health services.

As a further note, some volunteer behavioral health disaster responders are available to participate in local drills/exercises. If you would like volunteer behavioral health disaster responders to participate in a local drill/exercise, please contact both Jeff Timperi and Ashley Pearson.

IV Long-Term Disaster Behavioral Health Services

As stated earlier, behavioral health disaster responders provide a short-term intervention. To inquire about long-term disaster mental health services please contact Ashley Pearson (MDMH) at 617.626.8145. To inquire about long-term substance abuse services please contact Rodrigo Monterrey (MDPH-BSAS) at 617.624.5147.

V Further state disaster behavioral health services

a. All-Hazards Emergency Planning Guide for Massachusetts Substance Abuse and Mental Health Service Providers

This guide (http://www.mass.gov/samh/pdfs/all_hazards_guide.pdf) was developed by MDPH and MDMH to assist these providers in developing all-hazards plans for their facilities.

Training courses were held for mental health and substance abuse providers to assist them in their all-hazards planning. Future training courses are proposed in April, 2006. For more information about these courses please contact Rodrigo Monterrey (MDPH-BSAS) at 617.624.5145.

b. Disaster Behavioral Health Presentations

The following training courses are offered upon request and conducted by Dr. Lisa Gurland as time allows. Lisa is the Director of Behavioral Health Planning and Development for MDPH. She can be reached at 617.983.6552 or via e-mail at Lisa.Gurland@state.ma.us.

Behavioral Health Disaster Response: Overview

This presentation will provide an explanation of why behavioral health concerns are a major component of emergency events. Included will be a definition of behavioral health and a description of how behavioral health interventions can both prevent and mitigate certain consequences of disasters and other emergencies. The presentation will identify how emergency events affect individuals, families and communities and how disaster stress, a normal response to abnormal events, is usually manifested. Long-term behavioral health effects of disasters will be explained and discussed in the context of both prevention and intervention.

Presentation Objectives:

- Explain why behavioral health concerns are a major component of emergency events
- Understand how emergency events affect the behavioral health of communities, individuals, and families
- Describe the symptoms and manifestations of disaster stress (the normal response to an abnormal event) and the relevant issues of prevention and intervention

Time for this presentation is 1.0 hour

Behavioral Health Disaster Response: Psychological First Aid

This presentation will provide an explanation of why behavioral health concerns are a major component of emergency events and how behavioral health interventions can both prevent and mitigate certain consequences of disasters and other emergencies. Long-term behavioral health effects of disasters will be explained and discussed in the context of both prevention and intervention. Psychological First Aid will be defined and differentiated from other types of mental health care. Through didactic presentation and the use of role-plays and case vignettes, intervention techniques for Psychological First Aid will be demonstrated and compared. The importance of identifying self-care issues will be outlined and useful methods for reducing stress and secondary trauma among responders will be formulated.

Presentation Objectives:

- Understand how emergency events affect the behavioral health of individuals, families and communities
- Describe the symptoms and manifestations of disaster stress (the normal response to an abnormal event) and the relevant issues of prevention and intervention
- Define and formulate Psychological First Aid techniques in Behavioral Health Disaster Response
- Outline self-care techniques to reduce stress and prevent secondary trauma among Behavioral Health Disaster Responders
- Demonstrate Psychological First Aid through role-plays and case studies

Time for this presentation is 2.5 hours

c. State Disaster Behavioral Health Services Committee

MDMH and MDPH have formed a statewide disaster behavioral health services committee. The committee is composed of public and private stakeholders from emergency management and behavioral health fields and meets on a bi-monthly basis. For more information about this committee, please contact either Ashley Pearson (MDMH) at 617.626.8145 or Rodrigo Monterrey (DPH-BSAS) at 617.624.5147.

If you should have any questions regarding this document please contact Jeff Timperi, Behavioral Health and Special Populations Liaison for MDPH-CEP at 617.624.5275 or via e-mail at Jeffrey.Timperi@state.ma.us. You may also contact Ashley Pearson, Emergency Management Director for MDMH at 617.626.8145 or via e-mail at Ashley.Pearson@state.ma.us.